

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000497

Entity Name: A&W-1 CORPORATION, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

8764 SW 177 TERR
MIAMI, FL 33157 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 972411
MIAMI, FL 33197 US

New Mailing Address:

FEI Number: 65-0641427

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

JOHNSON, HELEN J
8764 SW 177TH TERRACE
MIAMI, FL 33170 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: RICE, RANDOLPH
Address: 8764 SW 177TH TERRACE
City-St-Zip: MIAMI, FL

Title: V () Delete
Name: DENNARD, LARRY D
Address: 200 SW 11TH AVE
City-St-Zip: SOUTH BAY, FL 33413

Title: ST () Delete
Name: JOHNSON, HELEN
Address: 8764 SW 177TH TERRACE
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: JOHNSON, HELEN
Address: 8764 S.W 177 TERR
City-St-Zip: MIAMI, FL

Title: D () Delete
Name: DENNARD, LARRY D
Address: 200 SW 11TH AVE
City-St-Zip: SOUTH BAY, FL 33413

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RANDOLPH R. RICE

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date